

|   |   |   |                                   |          |      |
|---|---|---|-----------------------------------|----------|------|
| <b>AMENDMENT TRANSMITTAL LETTER</b>   |   |   | Docket No.<br>M1100.70002US00     |          |      |
| Application No.<br>10/532,278-Conf. #8497   | Filing Date<br>April 21, 2005             | Examiner<br>P. V. Ward                  | Art Unit<br>1624                  |          |      |
| Applicant(s): Gabrio Roncucci et al.  |   |   |                                   |          |      |
| Invention: MESO-SUBSTITUTED PORPHYRINS  |   |   |                                   |          |      |
| <b>TO THE COMMISSIONER FOR PATENTS</b>  |   |   |                                   |          |      |
| Transmitted herewith is an amendment in the above-identified application.   |   |   |                                   |          |      |
| The fee has been calculated and is transmitted as shown below.  |   |   |                                   |          |      |
| <b>CLAIMS AS AMENDED</b>  |   |   |                                   |          |      |
|   | Claims<br>Remaining<br>After<br>Amendment | Highest<br>Number<br>Previously<br>Paid | Number<br>Extra Claims<br>Present | Rate     |      |
| <b>Total Claims</b>   | 10  | - 34 =                                  | 0                                 | x 26.00  | 0.00 |
| <b>Independent Claims</b>   | 2   | - 3 =                                   | 0                                 | x 110.00 | 0.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/>  |   |   |                                   |          |      |
| Other fee (please specify):   |   |   |                                   |          |      |
| <b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>   |   |   |                                   |          | 0.00 |
| <input type="checkbox"/> Large Entity <input checked="" type="checkbox"/> Small Entity  |   |   |                                   |          |      |
| <input checked="" type="checkbox"/> No additional fee is required for this amendment.   |   |   |                                   |          |      |
| <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____.   |   |   |                                   |          |      |
| <input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.   |   |   |                                   |          |      |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.   |   |   |                                   |          |      |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>23/2825</u><br>as described below. A duplicate copy of this sheet is enclosed.  |   |   |                                   |          |      |
| <input checked="" type="checkbox"/> Credit any overpayment.   |   |   |                                   |          |      |
| <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.  |   |   |                                   |          |      |
| /Michael J. Pomianek/<br>Michael J. Pomianek, Ph.D.<br>Attorney/Agent Reg. No.: 46,190<br><br>WOLF, GREENFIELD & SACKS, P.C.<br>600 Atlantic Avenue<br>Boston, Massachusetts 02210-2206<br>617.646.8000   |   |   | Dated: <u>August 12, 2010</u>     |          |      |
| <b>Certificate of Electronic Filing Under 37 CFR 1.8</b><br>I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).<br><br>Dated: August 12, 2010 <span style="float: right;">Electronic Signature for Judy Daley: /Judy Daley/</span> |   |   |                                   |          |      |